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# Spreading Vaccine 'Misinformation' Puts Medical License at Risk, U.S. Boards Tell Physicians

*Three U.S. medical certifying boards have warned doctors they risk losing their certification and license if they spread COVID vaccine misinformation, but the boards offered no clear definition of "misinformation."*

**By Peter Doshi**

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Three U.S. medical certifying boards have warned doctors that they risk losing their certification and license if they spread COVID vaccine misinformation.

Internists, family doctors and pediatricians received an email on Sept. 9 that quoted a warning from the Federation of State Medical Boards in July which read:

> "Providing misinformation about the COVID-19 vaccine contradicts physicians' ethical and professional responsibilities, and therefore may subject a physician to disciplinary actions, including suspension or revocation of their medical licence."

Richard Baron, president and chief executive of the American Board of Internal Medicine (ABIM), told The BMJ that the move was an attempt to establish a standard of care.

"As standard setting organizations, we thought it was important to be on record, in a public way, to make clear that putting out flagrant misinformation is unethical and dangerous during a pandemic." Baron said that the statement has been well received — "4 to 1 positive."

But community physicians contacted by The BMJ thought differently.

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"When I got that email I thought I'd better not put anything on social media about vaccines," said Shveta Raju, a community physician in the Atlanta, Georgia, area, who has treated COVID patients and led the vaccination effort at her outpatient clinic.

"The email was sent more as a veiled threat to keep doctors on the official, established narrative,

and that's what I find chilling," said a pediatrician who pseudonymously blogs under the name Elizabeth Bennett.

"Pandemic or no, there is a problem with having an ill-defined concept of misinformation that's tied to public health messaging that hasn't been consistent. How are physicians supposed to figure out what is misinformation when public health messaging swings so wildly?" Bennett asked.

**Undefined offense**

Baron said that the statement was also intended to signal the certifying boards' support for physicians "trying to do the right thing."

"We wanted to support that group and say 'hey, we do have a standard of care here and you are doing the right thing when you uphold it,'" he said.

Raju responded, "If that was their intent, they should have defined misinformation. By leaving it undefined, the message was that we can't talk about this at all." She said that physicians are, by and large, a conservative group. "If they're not sure what can be deemed misinformation, physicians would rather be quiet."

Bennett concurred: "The thing I find most alarming is that they don't define misinformation, but if they strip you of your board certification, you would lose your means of earning a living."

**Doctors spreading misinformation?**

Official and social media company efforts to target "vaccine misinformation" predate the pandemic. But the new statement from ABIM, the American Board of Family Medicine, and the American Board of Pediatrics is one of several recent statements putting doctors in the spotlight for the first time.

In Canada, warnings about physician information began earlier, when in April the College of Physicians and Surgeons of Ontario declared that physicians "have a professional responsibility not to communicate anti-vaccine, anti-masking, anti-distancing, and anti-lockdown statements or promote unsupported, unproven treatments for COVID-19."

The Canadian statement triggered an outcry, leading to a clarification that the statement was "not intended to stifle a healthy public debate about how best to address aspects of the pandemic."

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But concerns continued. In June, a Canadian member of parliament held a press conference on censorship of Canadian clinicians and scientists. YouTube removed the video of the meeting.

The BMJ asked ABIM about the size of the problem of board certified physicians spreading misinformation. "We don't have a sense of numbers of physicians spreading misinformation," Baron said. "We're at the beginning." He believed it was only a "small number of doctors."

The medical boards opted to send the statement to all doctors, he said, because focusing on just the offending individuals would "miss the impact they're having because of how much their voices are being amplified."

As an example of "unprofessional or unethical behaviour," Baron cited the case of a Florida doctor offering medical exemptions from mask wearing for $50 (£37; €43).

**Personalized medicine — or one-size-fits-all?**

The BMJ asked whether physicians expressing doubt about the need for booster doses or vaccination of patients with natural immunity — two matters that have been the subject of debate and changing official guidance — would qualify as misinformation.

"I don't think we have concerns with doctors wrestling with areas where the science is unclear," Baron said, "but there is no debate about whether people should get a primary vaccination series."

Raju worries about the impact on personalized care. "The job of physicians is to take guidelines and apply them to the patient in front of them." But now "physicians are basically being told that when it comes to COVID vaccines it's one-size-fits-all."

Baron said: "We're not trying to stifle conversations between doctors and patients. We understand that different people may look at evidence in different ways, but when you have an overwhelming preponderance of medical consensus in a certain area, you need at least to tell patients that there is an overwhelming professional consensus here."

**Cautious approach**

Jeffrey Flier, former dean of Harvard Medical School, said that in the context of the pandemic, he was "not opposed to certain levels of misinformation triggering a decision to question somebody's license." He said, "I can see this being an appropriate remedy at a time of public health emergency.

"But this is not how the system for licensure and certification has traditionally worked, and creates many opportunities for mistaken judgment about what is and is not misinformation, and those decisions would have to be rendered with extreme caution."

Flier added, "We have to remember that there are legitimate areas of debate, and such matters should not fall within the scope of disciplinary actions.

"There are reasons to be concerned that state boards might be unprepared for these kinds of decisions at a time when so many aspects of COVID policy have been enmeshed with political views."

**Footnotes**:

- This article was updated on Oct. 4 to make clear that it was medical certifying boards, rather than licensing boards, that emailed physicians. The email quoted an earlier warning from the Federation of State Medical Boards.
- Competing interests: Peter Doshi gave a public statement at a Sept. 17, 2021 FDA advisory committee to discuss COVID-19 vaccines, where he highlighted the joint statement. The views and opinions expressed here are those of the author and do not necessarily reflect official policy or position of the University of Maryland.

**Provenance**: commissioned — not externally peer reviewed.

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